UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response......16.00

SEC USE ONLY					
Prefix	Serial				
DATE RECEI	VED				

Name of Offering (che	ck if this is an amendment and name has changed, and indi		TOULGOLD
	Commonfund Hedged Equity Company		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE	AUG 2 4 2007 /
Type of Filing: New F			AUO 2 4 2001
	A. BASIC IDENTIF	FICATION DATA	761000000
1. Enter the information r	equested about the issuer		#HUMSUN
	if this is an amendment and name has changed, and indicat	te change.)	FINANCIAL
Commonfund Hedged E	quity Company		
Address of Executive Offi	ces (Number and Street, City, State, Zip Code)	Telephone Number (inclu	ding Area Code)
	Management Company, Inc.	·	
15 Old Danbury Road		(203) 563-5000	RECEIVED
P.O. Box 812			TEOLIVED WAS
Wilton, CT 06897		<u> </u>	
Address of Principal Busin	ness Operations (Number and Street, City, State, Zip Code)	Telephone Number (inclu	ding Area Code) 110 1 0000
(if different from Executive	ve Offices)	<u>.</u> .	AUG 1 7 2007
Brief Description of Busin	ness		
Private Investment Fund	<u> </u>		1305
Type of Business Organiza	ation		100 200
corporation	☐limited partnership, already formed	_	
_		other (please specify): Cayman I	slands Exempted Company
☐ business trust	☐ limited partnership, to be formed	. <u>"</u>	
	Month Year		•
Actual or Estimated Date	of Incorporation or Organization: 0 3 0 1	Actual Estimated	
Jurisdiction of Incorporation	on or Organization: (Enter two-letter U.S. Postal Service a	bbreviation for State:	
•	CN for Canada; FN for other		
CENEDAL INCEDICE		Totalgo jarioussion,	
GENERAL INSTRUCT	IUNS .		

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - X Each promoter of the issuer, if the issuer has been organized within the past five years;
 - X Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - X Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Hutton, Lyn	if individual)				
Business or Residence Addr	ess (Number an	id Street, City, State, Zip	Code)		
c/o Commonfund Asset Mana	gement Compan	y, Inc., 15 Old Danbury R	load, P.O. Box 812, Wilton	CT 06897	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, De Monico, A. Nicholas					
Business or Residence Addr c/o Commonfund Asset Mana				, CT 06897	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Sedlacek, Verne O.	if individual)				
Business or Residence Addr				CCT 04000	•
c/o Commonfund Asset Mana		· <u> </u>	_		
Check Box(es) that Apply: Full Name (Last name first,	Promoter	Beneficial Owner			General and/or Managing Partner
Auchincloss, John W.	•		<i></i>		·
Business or Residence Addr c/o Commonfund Asset Mana				CT 06897	
	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Kirby, Peter L.					
Business or Residence Addr					
c/o Commonfund Asset Mana		** <u></u>			
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Mosher, Susan C.	ii individual)				
Business or Residence Addr					· · · · · · · · · · · · · · · · · · ·
c/o Commonfund Asset Mana		_		_	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☑ Investment Manager
Full Name (Last name first, Commonfund Asset Managen		nc.			
Business or Residence Addr 15 Old Danbury Road, P.O. B	ess (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ess (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number an	d Street, City, State, Zip	Code)		

					B. INFO	RMATIO	N ABOU	T OFFER	RING					
1. Has	the issuer sol	d, or does t	he issuer in	tend to sell,	to non-acc	redited inv	estors in thi	s offering?			••••••	******	Yes	No ⊠
				,	Answer also	in Append	lix, Column	2, if filing	under ULO	E.				
2. Wha	t is the minin	num investi	nent that w	ill be accen	ted from an	v individus	al? *Subje	et to Mana	igement Di	scretion			\$ 1,000,000*	
	3. Does the offering pennit joint ownership of a single unit?						Yes	No						
J. DOG									Ø					
remi perso	r the informa ineration for on or agent o (5) persons to	solicitation f a broker o	of purchase r dealer reg	ers in conne istered with	ction with : the SEC a	sales of sec nd/or with:	urities in the state or sta	e offering ates, list the	If a person name of th	to be listed to broker or	is an assoc dealer. If r	iated more than		
	Last name fi	•	idual)		·									
											·			
	Residence A bury Road,			treet, City,	State, Zip C	Code)								
Name of As	ssociated Bro	ker or Deal	er					<u> </u>						
States in W	hich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers								
(Chec	k "All States"	or check i	ndividua! S	tates)	••••••					🛭	All States			
(AL) (IL) [MT] (RI)	[AK] [IN] [NE] [SC]	[AZ] (IA] [NV] (SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) (LA) (NM) (UT)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] {MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last name fi	rst, if indivi	idual)	•					-					
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of As	sociated Bro	ker or Deal	er						·	··· -				
States in W	hich Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers		· -						
(Check "All	States" or cl	heck individ	iual States)						•••••	[All States			
(AL) (IL) (MT) (RI)	(AK) (IN) (NE) (SC)	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] [PR]		
Full Name (Last name fi	rst, if indivi	idual)											
Business or	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of As	sociated Bro	ker or Deal	er											
States in W	hich Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers								•
(Check "All	States" or cl	heck individ	lual States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			************				All States			
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	{CA} [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE) [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) (MI) (OH) (WV)	[GA] [MN] (OK] (WI)	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate Offering	Amount Already
	Type of Security	Price	Sold
	Debt	<u>s</u>	<u>s</u>
	Equity	<u>s</u>	<u> </u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	<u>\$</u>	\$
	Partnership Interests	<u> </u>	5
	Other (Specify) Participating Shares	\$ 1,147,990,845	\$ 1,147,990,845
	Total	\$ 1,147,990,845	\$ 1,147,990,845
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	\$ 1,147,990,845
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		S
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		5
	Regulation A		S
	Rule 504		5
	Total		S
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		5
	Legal Fees		S
	Accounting Fees		s
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)		s
	Tarel		• 0

_	C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
4.		ering price given in response to Part C - Question 1 and total on 4.a. This difference is the "adjusted gross proceeds to the		\$ 1,147,990,845
5.	the purposes shown. If the amount for any purpose	roceeds to the issuer used or proposed to be used for each of se is not known, furnish an estimate and check the box to the ed must equal the adjusted gross proceeds to the issuer set		
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		□\$	□ s
	Purchase of real estate		🗆 S	□ s
	Purchase, rental or leasing and installation of mac	hinery and equipment	🗆 S	🗆 s
	Construction or leasing of plant buildings and fac	ilities		□s
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset pursuant to a merger)		_ \$	□įs
	Repayment of indebtedness	🗆 s	□s	
	Working capital	🗆 s	□s	
	Other (specify): Investment in portfolio securit	ies and related expenses	s	⊠ \$ 1,147,990,845
	Column Totals		🗆 s	⋈ \$ 1,147,990,845
	Total Payments Listed (column totals added)			7,990,845
		D. FEDERAL SIGNATURE		
n u		e undersigned duly authorized person. If this notice is filed ities and Exchange Commission, upon written request of its		
lss	ier (Print or Type)	Signature Do	ite 11	
	mmonfund Hedged Equity Company		igust 14, 2007	
	me of Signer (Print or Type)	Title of Signer (Print or Type) Assistant Secretary of the Issuer		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

